

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

AUG 26 11 43 AM '99

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) AMERICAN ACADEMY OF OPHTHALMOLOGY, INC. (OPHTHPAC)		2. FEC IDENTIFICATION NUMBER C00196246
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 655 BEACH STREET		
CITY, STATE and ZIP CODE SAN FRANCISCO, CA 94109		
		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

### Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

- Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_  
 Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

(b) Is this Report an Amendment?     YES     NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>July 1</u> through <u>July 31, 1999</u>		\$ 184,569.36
6. (a) Cash on Hand January 1, 19 <u>99</u>		
(b) Cash on Hand at Beginning of Reporting Period	\$ 93,723.35	
(c) Total Receipts (from Line 19)	\$ 2,067.37	\$ 73,496.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 95,790.90	\$ 258,065.91
7. Total Disbursements (from Line 20)	\$ (941.48)	\$ 161,333.53
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 96,732.38	\$ 96,732.38
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

For further information contact:  
Federal Election Commission  
895 E Street, NW  
Washington, DC 20483  
Toll Free 800-424-9530  
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Paula E. Lent

Signature of Treasurer

*Paula E. Lent*

Date

8/20/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §497g.

FEC FORM 3X

(revised 9/83)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
	FROM 7/1/99	TO: 7/31/99
	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	1,950.00	63,650.00
ii. Unitemized	100.00	9,725.00
iii. Total (add i and ii) >	2,050.00	73,375.00
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contributions (add a ii, b and c) >	2,050.00	73,375.00
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	17.37	121.55
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2,067.37	73,496.55
20. Total Federal Receipts (subtract line 18 from line 19) >	2,067.37	73,496.55
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0	0
ii. Non-Federal Share	0	0
b. Other Federal Operating Expenditures	23.41	1,084.01
c. Total Operating Expenditures (add a i, a ii, and b) >	23.41	1,084.01
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	129,825.24
24. Independent Expenditures (use Schedule E)	0	30,251.17
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	0	300.00
b. Political Party Committees	(1,964.89)	(1,964.89)
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (add a, b and c) >	(1,964.89)	(1,964.89)
29. Other Disbursements	0	1,838.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	(941.48)	161,333.53
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	(941.48)	161,333.53
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d)	2,050.00	73,375.00
33. Total Contribution Refunds (from line 28d)	(1,964.89)	(1,664.89)
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,014.89	75,039.89
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	23.41	1,084.01
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) >	23.41	1,084.01

Itemized Receipts  
Contributions from Individuals Other than Political Committees

SCHEDULE A  
From 07/01/99 To 07/31/99

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME AND ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE RECEIPT AMOUNT	YTD AMOUNT
Ozog Eye Care Center 400 15th Ave South Suite 106 Great Falls MT 59405	self Ophthalmologist	500.00	07/09/1999	300.00
Ozog Eye Care Center 400 15th Ave South Suite 106 Great Falls MT 59405	self Ophthalmologist	500.00	07/09/1999	200.00
Davenport Richard D Suite 204 2426 South 90th Street West Allis WI 53227	R D DAVENPORT MD SC Physician	250.00	07/09/1999	250.00
Kunesh Michael T 1121 Cedar Creek Circle Dayton OH 45459	KUNESH EYE CENTER Ophthalmologist	300.00	07/09/1999	300.00
Liegner Jeffrey Todd Eye Care Northwest 350 Sparte Ave Bldg A Sparta NJ 07871	UTMSC SA Ophthalmologist	300.00	07/09/1999	300.00
Petersen Malzer C Suite 623 801 Broadway Seattle WA 98122	self employed Ophthalmologist	300.00	07/16/1999	300.00

Subtotal: 1,650.00

Itemized Receipts  
Contributions from Individuals Other than Political Committees

SCHEDULE A

From: 07/01/99 To 07/31/99

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NAME and ADDRESS	EMPLOYER/OCCUPATION	YTD AMOUNT	DATE RECEIPT AMOUNT
Sibley Mark A Florida Eye Center 1515 Birch Avenue North St Petersburg FL 33705	Surcoast Medical Cti Ophthalmologist	300.00	07/16/1999 300.00

Subtotal: 300.00

TOTAL: 1,950.00

American Academy of Ophthalmology Inc Political Committee (COMTRIPAC)  
Itemized Receipts  
Contributions from individuals other than Political Committees

08/11/99

SCHEDULE A

From 07/01/99 To 07/31/99

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NAME and ADDRESS	EMPLOYER/OCCUPATION	DATE	RECEIPT AMOUNT	YTD AMOUNT
Blecharski Paul A PO Box 2500 Temecule CA 92593-2500	Inland Valley Retina Ophthalmologist	07/16/1999	100.00	100.00

Subtotal: 100.00  
TOTAL: 100.00

08/15/99

page: 1 of 1  
Line Number 23

American Academy of Ophthalmology Inc Political Committee (OPHTHAC)  
Itemized Disbursements  
Contributions to Federal Candidates and Other Political Committees

Schedule B  
From 07/01/99 To 07/31/99

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NAME and ADDRESS DISBURSEMENT PURPOSE DATE AMOUNT

Louise Blaughter Re-election Comm  
PO Box 74117

07/27/1999 1,000.00

HOUSE / 28 / NY  
2000 / primary

Rochester NY 14614

Subtotal: 1,000.00

TOTAL: 1,000.00



ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (In Full) American Academy of Ophthalmology, Inc. (OPETHPAC) 655 Beach Street, San Francisco, CA 94109		CD0196246		
Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
Political Insights, Inc. 4622 7th Court E Ellenton, FL 34222	Brochure Mailing	4/20/99	29,501.17	Monica Monica, MD Campaign 143 Robert E. Lee Blv New Orleans, LA 7021 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Franklin Press, Inc. 1391 Highland Road P.O. Box 1269 Baton Rouge, LA 70821	Louisiana Voter File Congressional District 1	4/20/99	750.00	R-House-1st-LA District (same as above) <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures			\$ 30,251.17	
(b) SUBTOTAL of Unitemized Independent Expenditures			\$ 0	
(c) TOTAL Independent Expenditures			\$ 30,251.17	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Paul E Lent 4/21/99

Subscribed and sworn to before me this 21 day of April, 1999  
My Commission expires 4-19-01  
LOIS KAY UNCK  
NOTARY PUBLIC

Lois Kay Unck

LOIS KAY UNCK

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 8-23-99
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	8-26-99 DATE PREPARED